

Fill in this information to identify the case:Debtor name NTI Ground Trans Inc.United States Bankruptcy Court for the: DISTRICT OF NEVADACase number (if known) 22-10458☐ Check if this is an amended filingOfficial Form 202**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☐ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on March 25, 2022**X /s/ James R. Gleich**

Signature of individual signing on behalf of debtor

James R. Gleich

Printed name

President

Position or relationship to debtor

Fill in this information to identify the case:Debtor name **NTI Ground Trans Inc.**United States Bankruptcy Court for the: **DISTRICT OF NEVADA**Case number (if known) **22-10458**☐ Check if this is an amended filing**Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals**

12/15

Part 1: Summary of Assets**1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

| | |
|---|------------------------|
| 1a. Real property: Copy line 88 from <i>Schedule A/B</i> | \$ 0.00 |
| 1b. Total personal property: Copy line 91A from <i>Schedule A/B</i> | \$ 1,620,124.66 |
| 1c. Total of all property: Copy line 92 from <i>Schedule A/B</i> | \$ 1,620,124.66 |

Part 2: Summary of Liabilities

| | |
|--|----------------------|
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i> | \$ 0.00 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F) | |
| 3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i> | \$ 0.00 |
| 3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i> | +\$ 68,008.07 |
| 4. Total liabilities Lines 2 + 3a + 3b | \$ 68,008.07 |

Fill in this information to identify the case:Debtor name **NTI Ground Trans Inc.**United States Bankruptcy Court for the: **DISTRICT OF NEVADA**Case number (if known) **22-10458**☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. **Lexicon Bank****Business Checking****4880****\$2,719.24****4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$2,719.24**Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.
☐ Yes Fill in the information below.

Part 3: Accounts receivable**10. Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.
☒ Yes Fill in the information below.

11. Accounts receivable

11a. 90 days old or less:

20.94

-

0.00

=

\$20.94

face amount

doubtful or uncollectible accounts

Debtor **NTI Ground Trans Inc.**
NameCase number (If known) **22-10458**

| | | | | | |
|---------------------------|-----------------|---|------------------------------------|--------|-------------------|
| 11a. 90 days old or less: | <u>1,869.60</u> | - | <u>0.00</u> | = | <u>\$1,869.60</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|--------------|---|------------------------------------|--------|----------------|
| 11a. 90 days old or less: | <u>71.56</u> | - | <u>0.00</u> | = | <u>\$71.56</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|--------------|---|------------------------------------|--------|----------------|
| 11a. 90 days old or less: | <u>11.84</u> | - | <u>0.00</u> | = | <u>\$11.84</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|-----------------|---|------------------------------------|--------|-------------------|
| 11a. 90 days old or less: | <u>1,576.72</u> | - | <u>0.00</u> | = | <u>\$1,576.72</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|------------------|---|------------------------------------|--------|--------------------|
| 11a. 90 days old or less: | <u>17,201.50</u> | - | <u>0.00</u> | = | <u>\$17,201.50</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|-------------|---|------------------------------------|--------|---------------|
| 11a. 90 days old or less: | <u>1.28</u> | - | <u>0.00</u> | = | <u>\$1.28</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|--------------|---|------------------------------------|--------|----------------|
| 11a. 90 days old or less: | <u>43.98</u> | - | <u>0.00</u> | = | <u>\$43.98</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|------------------|---|------------------------------------|--------|--------------------|
| 11a. 90 days old or less: | <u>16,105.00</u> | - | <u>0.00</u> | = | <u>\$16,105.00</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|---------------|---|------------------------------------|--------|-----------------|
| 11a. 90 days old or less: | <u>279.64</u> | - | <u>0.00</u> | = | <u>\$279.64</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|------------------|---|------------------------------------|--------|--------------------|
| 11a. 90 days old or less: | <u>25,610.41</u> | - | <u>0.00</u> | = | <u>\$25,610.41</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|-------------------|---|------------------------------------|--------|---------------------|
| 11a. 90 days old or less: | <u>369,384.20</u> | - | <u>0.00</u> | = | <u>\$369,384.20</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|------------------|---|------------------------------------|--------|--------------------|
| 11a. 90 days old or less: | <u>59,549.00</u> | - | <u>0.00</u> | = | <u>\$59,549.00</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|---------------|---|------------------------------------|--------|-----------------|
| 11a. 90 days old or less: | <u>628.74</u> | - | <u>0.00</u> | = | <u>\$628.74</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|------------------|---|------------------------------------|--------|--------------------|
| 11a. 90 days old or less: | <u>12,448.91</u> | - | <u>0.00</u> | = | <u>\$12,448.91</u> |
| | face amount | | doubtful or uncollectible accounts | | |

Debtor **NTI Ground Trans Inc.**
NameCase number (If known) **22-10458**

| | | | | | |
|---------------------------|-------------------------|---|------------------------------------|--------|---------------------------|
| 11a. 90 days old or less: | <u>39,301.11</u> | - | <u>0.00</u> | = | <u>\$39,301.11</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|---------------------|---|------------------------------------|--------|-----------------------|
| 11a. 90 days old or less: | <u>98.08</u> | - | <u>0.00</u> | = | <u>\$98.08</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|------------------------|---|------------------------------------|--------|--------------------------|
| 11a. 90 days old or less: | <u>3,421.67</u> | - | <u>0.00</u> | = | <u>\$3,421.67</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|--------------------------|---|------------------------------------|--------|----------------------------|
| 11a. 90 days old or less: | <u>449,559.32</u> | - | <u>0.00</u> | = | <u>\$449,559.32</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|---------------------|---|------------------------------------|--------|-----------------------|
| 11a. 90 days old or less: | <u>16.00</u> | - | <u>0.00</u> | = | <u>\$16.00</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|------------------------|---|------------------------------------|--------|--------------------------|
| 11a. 90 days old or less: | <u>3,071.58</u> | - | <u>0.00</u> | = | <u>\$3,071.58</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|----------------------|---|------------------------------------|--------|------------------------|
| 11a. 90 days old or less: | <u>251.44</u> | - | <u>0.00</u> | = | <u>\$251.44</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|---------------------|---|------------------------------------|--------|-----------------------|
| 11a. 90 days old or less: | <u>44.48</u> | - | <u>0.00</u> | = | <u>\$44.48</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|----------------------|---|------------------------------------|--------|------------------------|
| 11a. 90 days old or less: | <u>122.22</u> | - | <u>0.00</u> | = | <u>\$122.22</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|-------------------------|---|------------------------------------|--------|---------------------------|
| 11a. 90 days old or less: | <u>71,986.06</u> | - | <u>0.00</u> | = | <u>\$71,986.06</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|----------------------|---|------------------------------------|--------|------------------------|
| 11a. 90 days old or less: | <u>162.04</u> | - | <u>0.00</u> | = | <u>\$162.04</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|--------------------------|---|------------------------------------|--------|----------------------------|
| 11a. 90 days old or less: | <u>161,985.05</u> | - | <u>0.00</u> | = | <u>\$161,985.05</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|---------------------|---|------------------------------------|--------|-----------------------|
| 11a. 90 days old or less: | <u>78.80</u> | - | <u>0.00</u> | = | <u>\$78.80</u> |
| | face amount | | doubtful or uncollectible accounts | | |

Debtor **NTI Ground Trans Inc.**
NameCase number (If known) **22-10458**

| | | | | | |
|---------------------------|--------------|---|------------------------------------|--------|----------------|
| 11a. 90 days old or less: | <u>40.44</u> | - | <u>0.00</u> | = | <u>\$40.44</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|--------------|---|------------------------------------|--------|----------------|
| 11a. 90 days old or less: | <u>33.42</u> | - | <u>0.00</u> | = | <u>\$33.42</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|---------------|---|------------------------------------|--------|-----------------|
| 11a. 90 days old or less: | <u>391.64</u> | - | <u>0.00</u> | = | <u>\$391.64</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|-----------------|---|------------------------------------|--------|-------------------|
| 11a. 90 days old or less: | <u>5,259.97</u> | - | <u>0.00</u> | = | <u>\$5,259.97</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|------------------|---|------------------------------------|--------|--------------------|
| 11a. 90 days old or less: | <u>68,951.20</u> | - | <u>0.00</u> | = | <u>\$68,951.20</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|-------------------|---|------------------------------------|--------|---------------------|
| 11a. 90 days old or less: | <u>133,314.50</u> | - | <u>0.00</u> | = | <u>\$133,314.50</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|--------------|---|------------------------------------|--------|----------------|
| 11a. 90 days old or less: | <u>45.02</u> | - | <u>0.00</u> | = | <u>\$45.02</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|-----------------|---|------------------------------------|--------|-------------------|
| 11a. 90 days old or less: | <u>6,019.00</u> | - | <u>0.00</u> | = | <u>\$6,019.00</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|--------------|---|------------------------------------|--------|----------------|
| 11a. 90 days old or less: | <u>74.14</u> | - | <u>0.00</u> | = | <u>\$74.14</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|------------------|---|------------------------------------|--------|--------------------|
| 11a. 90 days old or less: | <u>22,727.35</u> | - | <u>0.00</u> | = | <u>\$22,727.35</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|-------------|---|------------------------------------|--------|---------------|
| 11a. 90 days old or less: | <u>6.90</u> | - | <u>0.00</u> | = | <u>\$6.90</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|---------------|---|------------------------------------|--------|-----------------|
| 11a. 90 days old or less: | <u>296.90</u> | - | <u>0.00</u> | = | <u>\$296.90</u> |
| | face amount | | doubtful or uncollectible accounts | | |

| | | | | | |
|---------------------------|-------------------|---|------------------------------------|--------|---------------------|
| 11a. 90 days old or less: | <u>145,343.77</u> | - | <u>0.00</u> | = | <u>\$145,343.77</u> |
| | face amount | | doubtful or uncollectible accounts | | |

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$1,617,405.42

Debtor **NTI Ground Trans Inc.**
Name

Case number (If known) **22-10458**

Part 4: Investments

13. Does the debtor own any investments?

- ☐ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☐ No. Go to Part 6.
☐ Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☐ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.
☐ Yes Fill in the information below.

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.
☐ Yes Fill in the information below.

Part 9: Real property

54. Does the debtor own or lease any real property?

- ☐ No. Go to Part 10.
☐ Yes Fill in the information below.

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

- ☐ No. Go to Part 11.
☐ Yes Fill in the information below.

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
☐ Yes Fill in the information below.

Debtor **NTI Ground Trans Inc.**
NameCase number (If known) **22-10458****Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

| Type of property | Current value of personal property | Current value of real property |
|---|------------------------------------|--------------------------------|
| 80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i> | \$2,719.24 | |
| 81. Deposits and prepayments. <i>Copy line 9, Part 2.</i> | \$0.00 | |
| 82. Accounts receivable. <i>Copy line 12, Part 3.</i> | \$1,617,405.42 | |
| 83. Investments. <i>Copy line 17, Part 4.</i> | \$0.00 | |
| 84. Inventory. <i>Copy line 23, Part 5.</i> | \$0.00 | |
| 85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i> | \$0.00 | |
| 86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i> | \$0.00 | |
| 87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i> | \$0.00 | |
| 88. Real property. <i>Copy line 56, Part 9.....></i> | | \$0.00 |
| 89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i> | \$0.00 | |
| 90. All other assets. <i>Copy line 78, Part 11.</i> | \$0.00 | |
| 91. Total. Add lines 80 through 90 for each column | \$1,620,124.66 | \$0.00 |
| 92. Total of all property on Schedule A/B. Add lines 91a+91b=92 | | \$1,620,124.66 |

Fill in this information to identify the case:

Debtor name NTI Ground Trans Inc.

United States Bankruptcy Court for the: DISTRICT OF NEVADA

Case number (if known) 22-10458

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

☒ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.

☐ Yes. Fill in all of the information below.

Fill in this information to identify the case:Debtor name **NTI Ground Trans Inc.**United States Bankruptcy Court for the: **DISTRICT OF NEVADA**Case number (if known) **22-10458**☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims****12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with **PRIORITY** unsecured claims and Part 2 for creditors with **NONPRIORITY** unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☒ No. Go to Part 2.☐ Yes. Go to line 2.**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

| | | Amount of claim | |
|-----|---|--|-------------------|
| 3.1 | Nonpriority creditor's name and mailing address Chi Group LLC 4105 Georgia Street #305 San Diego, CA 92103 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$425.83 |
| 3.2 | Nonpriority creditor's name and mailing address Chozen01 LLC 14622 Ventura Boulevard #102 Sherman Oaks, CA 91403 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,135.43 |
| 3.3 | Nonpriority creditor's name and mailing address Chuffers Partners LLC 1119 North Fries Avenue Wilmington, CA 90744 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$103.52 |
| 3.4 | Nonpriority creditor's name and mailing address COX Business PO Box 53214 Phoenix, AZ 85072 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Store Charge Account</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$603.52 |

| | | | |
|--------|--------------------------------------|------------------------|-----------------|
| Debtor | NTI Ground Trans Inc. Name | Case number (if known) | 22-10458 |
|--------|--------------------------------------|------------------------|-----------------|

| | | | |
|-----|--|--|--------------------|
| 3.5 | Nonpriority creditor's name and mailing address Drivewize LLC P. O. Box 180179 Coronado, CA 92178 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$51,557.41 |
|-----|--|--|--------------------|

| | | | |
|-----|---|--|-----------------|
| 3.6 | Nonpriority creditor's name and mailing address Gurvinderpal Singh 333 Hindry Avenue Inglewood, CA 90301 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$313.60 |
|-----|---|--|-----------------|

| | | | |
|-----|---|--|----------------|
| 3.7 | Nonpriority creditor's name and mailing address Jolie Limo LLC 19009 South Laurel Park Road Unit A Compton, CA 90220 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$52.50 |
|-----|---|--|----------------|

| | | | |
|-----|---|--|-------------------|
| 3.8 | Nonpriority creditor's name and mailing address Jose Razo 3629 Van Dyke Avenue San Diego, CA 92105 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,174.06 |
|-----|---|--|-------------------|

| | | | |
|-----|---|--|-------------------|
| 3.9 | Nonpriority creditor's name and mailing address Krithogu Travels LLC 21524 Belshire Avenue Unit 5 Hawaiian Gardens, CA 90716 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,078.79 |
|-----|---|--|-------------------|

| | | | |
|------|---|--|-------------------|
| 3.10 | Nonpriority creditor's name and mailing address LASxpress PO Box 19750 Las Vegas, NV 89132 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$4,800.00 |
|------|---|--|-------------------|

| | | | |
|------|--|--|-----------------|
| 3.11 | Nonpriority creditor's name and mailing address Milk Transportation, LLC 300 N 5th St Martins Ferry, OH 43935 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$185.88 |
|------|--|--|-----------------|

| | | | |
|--------|--------------------------------------|------------------------|-----------------|
| Debtor | NTI Ground Trans Inc. Name | Case number (if known) | 22-10458 |
|--------|--------------------------------------|------------------------|-----------------|

| | | | |
|------|---|--|-------------------|
| 3.12 | Nonpriority creditor's name and mailing address Mission Asset Management 2535 Camino del Rio South Suite 115 San Diego, CA 92108 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$5,161.04 |
|------|---|--|-------------------|

| | | | |
|------|---|--|-----------------|
| 3.13 | Nonpriority creditor's name and mailing address Nextiva 8800 E Chaparral Rd Ste 300 Scottsdale, AZ 85250 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$259.14 |
|------|---|--|-----------------|

| | | | |
|------|--|--|-----------------|
| 3.14 | Nonpriority creditor's name and mailing address Oscar Marin 607 Palm Avenue National City, CA 91950 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$134.54 |
|------|--|--|-----------------|

| | | | |
|------|--|--|-----------------|
| 3.15 | Nonpriority creditor's name and mailing address Pina Transportation LLC 2299 Sunset Drive Escondido, CA 92025 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$102.08 |
|------|--|--|-----------------|

| | | | |
|------|---|--|-----------------|
| 3.16 | Nonpriority creditor's name and mailing address Poehlman 4 14 Services LLC 8716 Vista Del Verde El Cajon, CA 92021 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$267.29 |
|------|---|--|-----------------|

| | | | |
|------|--|--|-----------------|
| 3.17 | Nonpriority creditor's name and mailing address Rancho Bernardo Signs 11305 Rancho Bernardo Road #107 San Diego, CA 92128 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$381.44 |
|------|--|--|-----------------|

| | | | |
|------|--|--|-----------------|
| 3.18 | Nonpriority creditor's name and mailing address Whip Around Inc. 5955 Carnegie Blvd Charlotte, NC 28209 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$272.00 |
|------|--|--|-----------------|

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

Debtor **NTI Ground Trans Inc.**
NameCase number (if known) **22-10458**

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

| Total of claim amounts | |
|------------------------|--------------|
| 5a. | \$ 0.00 |
| 5b. + | \$ 68,008.07 |
| 5c. | \$ 68,008.07 |

Fill in this information to identify the case:Debtor name **NTI Ground Trans Inc.**United States Bankruptcy Court for the: **DISTRICT OF NEVADA**Case number (if known) **22-10458**☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases****12/15****Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.****1. Does the debtor have any executory contracts or unexpired leases?**☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B). *Property***2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**2.1. State what the contract or lease is for and the nature of the debtor's interest **OFFICE LEASE-HILLWOOD**State the term remaining **exp. 5/31/2026**

List the contract number of any government contract _____

**9525 Hillwood, LLC
1333 North Buffalo Drive, Suite 120
Las Vegas, NV 89128**2.2. State what the contract or lease is for and the nature of the debtor's interest **OFFICE LEASE-RENO**State the term remaining **exp. 6/30/2022**

List the contract number of any government contract _____

**Bell Real Estate LLC
1900 Sunshine Lane
Las Vegas, NV 89102**2.3. State what the contract or lease is for and the nature of the debtor's interest **OFFICE LEASE-EXECUTIVE**

State the term remaining _____

List the contract number of any government contract _____

**Executive Las Vegas
3950 West Tompkins Avenue
Las Vegas, NV 89103**2.4. State what the contract or lease is for and the nature of the debtor's interest **OFFICE LEASE-LOS ANGELES**State the term remaining **exp. 7/31/2024**

List the contract number of any government contract _____

**LA Brea RE
4077 Randolph Rd Morristown
Morrisville, VT 05661**

Debtor 1 **NTI Ground Trans Inc.**

First Name

Middle Name

Last Name

Case number (if known) **22-10458****Additional Page if You Have More Contracts or Leases****2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.5. State what the contract or lease is for and the nature of the debtor's interest **OFFICE LEASE-SAN DIEGO**

State the term remaining **exp. 7/31/2023**

List the contract number of any government contract _____

**Mission Asset Management
2535 Camino Del Rio South #330
San Diego, CA 92108**

Fill in this information to identify the case:Debtor name NTI Ground Trans Inc.United States Bankruptcy Court for the: DISTRICT OF NEVADACase number (if known) 22-10458☐ Check if this is an amended filing

Official Form 206H

Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1 **National Transportation Inc.** **9525 Hillwood Dr. Ste. 170 Las Vegas, NV 89134**

☐ D _____
☐ E/F _____
☐ G _____